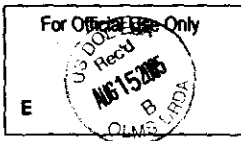


# FORM LM-30

## LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C 439 or 440.



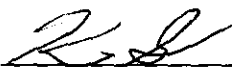
READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U - <b>7075</b>	2. Fiscal Year Covered From:  1 / 1 / 2004 Through: 12 / 31 / 2004
3. Name and address of person filing.  Name Keith Sklar  P.O. Box, Bldg., Room No., if any 15th Floor  Street 165 West 46th Street  City New York  State New York ZIP Code +4 10036-2500	4. Name, file number, and address of labor organization.  Name Actors' Equity Association  Labor Organization File Number 006-029  P.O. Box, Building and Room Number, if any 15th Floor  Street 165 West 46th Street  City New York  State New York ZIP Code +4 10036-2500
5. Position in labor organization. Business Representative	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
6. Name and address of Employer (including trade name, if any).  Name Manhattan Theatre Club  Trade Name, if any:  P.O. Box, Bldg., Room No., if any 8th Floor  Street 311 West 43rd Street  City New York  State New York ZIP Code +4 10036	7.a. Nature of Interest, Transaction, or Income.  2/7/2004: Show Ticket* - "Drowning Crow"  *This is an obligation per the collective bargaining agreement with the employer to determine the performance duties of our membership. This access is complimentary per industry standard.  7.b. Amount.  \$79

### Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents), has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed 	On 08/08/2005	(212) 869-8530
	Date	Telephone Number

## Part A Continuation Page

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

## 6. Name and address of Employer (including trade name if any).

Name Manhattan Theatre Club

Trade Name, if any:

P.O. Box, Bldg., Room No., if any 8th Floor

Street 311 West 43rd Street

City New York

State New York

ZIP Code + 4 10036

## 7.a. Nature of Interest, Transaction, or Income.

3/18/2004: Show Ticket\* - "Sarah, Sarah"

\*This is an obligation per the collective bargaining agreement with the employer to determine the performance duties of our membership. This access is complimentary per industry standard.

## 7.b. Amount.

\$48

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.

## 6. Name and address of Employer (including trade name if any).

Name Manhattan Theatre Club

Trade Name, if any:

P.O. Box, Bldg., Room No., if any 8th Floor

Street 311 West 43rd Street

City New York

State New York

ZIP Code + 4 10036

## 7.a. Nature of Interest, Transaction, or Income.

4/11/2004: Show Ticket\* - "Between Us"

\*This is an obligation per the collective bargaining agreement with the employer to determine the performance duties of our membership. This access is complimentary per industry standard.

## 7.b. Amount.

\$65

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## 6. Name and address of Employer (including trade name if any).

Name Manhattan Theatre Club

Trade Name, if any:

P.O. Box, Bldg., Room No., if any 8th Floor

Street 311 West 43rd Street

City New York

State New York

ZIP Code + 4 10036

## 7.a. Nature of Interest, Transaction, or Income.

5/7/2004: Show Ticket\* - Sight Unseen"

\*This is an obligation per the collective bargaining agreement with the employer to determine the performance duties of our membership. This access is complimentary per industry standard.

## 7.b. Amount.

\$75

Name of Person Filing Keith Sklar	File Number U-
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**Part A Continuation Page**

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A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
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A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent.	
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Name of Person Filing Keith Sklar	File Number U-
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**Part A Continuation Page**

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